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| <b>SERIAL NUMBER</b><br>10/723,273 | <b>FILING OR 371(c)<br/>DATE</b><br>11/25/2003<br><b>RULE</b> | <b>CLASS</b><br>128 | <b>GROUP ART UNIT</b><br>3772 | <b>ATTORNEY DOCKET<br/>NO.</b><br>017534-005310US |
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## \*\* CONTINUING DATA \*\*\*\*\*

This appln claims benefit of 60/429,902 11/27/2002 NP

## \*\* FOREIGN APPLICATIONS \*\*\*\*\*

## IF REQUIRED, FOREIGN FILING LICENSE GRANTED \*\*

\*\* SMALL ENTITY \*\*

02/25/2004

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|---|-----------------------------------|---------------------------------|--|--|
| Foreign Priority claimed<br>35 USC 119 (a-d) conditions met <input type="checkbox"/> yes <input checked="" type="checkbox"/> no<br>Verified and Acknowledged <u>/Nihar Patel/</u> NP<br>Examiner's Signature Initials | <b>STATE OR<br/>COUNTRY</b><br>CA | <b>SHEETS<br/>DRAWING</b><br>18 | <b>TOTAL<br/>CLAIMS</b><br>23 <u>32</u> NP | <b>INDEPENDENT<br/>CLAIMS</b><br>7 <u>8</u> NP |
|---|-----------------------------------|---------------------------------|--|--|

## ADDRESS

20350

## TITLE

Delivery methods and devices for implantable bronchial isolation devices

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|--|---|---|
| <b>FILING FEE<br/>RECEIVED</b><br>1064 | FEES: Authority has been given in Paper<br>No. _____ to charge/credit DEPOSIT ACCOUNT<br>No. _____ for following: | <input type="checkbox"/> All Fees<br><input type="checkbox"/> 1.16 Fees ( Filing )<br><input type="checkbox"/> 1.17 Fees ( Processing Ext. of time )<br><input type="checkbox"/> 1.18 Fees ( Issue )<br><input type="checkbox"/> Other<br><input type="checkbox"/> Credit |
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